

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Title:

A STACKABLE PLASTIC BOX BLANK AN DMETHOD OF

FORMING SAME

Dan Molander

Appl. No.:

09/687,654

Filing Date:

10/13/2000

Examiner:

Stephen J. Castellano

Art Unit:

3727

CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313, 1450, on the date below. (Printed Name) (Signature) (Oate of Deposit)

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the final rejection dated March 23, 2004 of the Examiner finally rejecting Claims 1-11 and 13-17.

- [] Applicant claims small entity status.
- [X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
- [X] Notice of Appeal Fee

[X]To be paid as detailed below

[]Not required (Fee paid in prior appeal)

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TECHNOLOGY CENTER R3700

05/11/2004 AWDNDAF1 00000018 09687654

01 FC:1402 02 FC:1252 330.00 OP 420.00 OP The required fees are calculated below:

[X]	Notice of Appeal Fee	\$330.00
[X]	Extension for response filed within the second month:	\$420.00
[]	Extension:	\$0.00
	FEE TOTAL:	\$750.00
[]	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$750.00

- [] Please charge Deposit Account No. 06-1450 in the amount of \$750.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$750.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date 5-7-04

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Respectfully submitted,

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